FEMA Form 007-0-11 OMB No.: 1660-0036 Expires:

Public reporting burden for this survey is estimated to average 15 minutes per response. The burden estimate includes the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and submitting the survey. You are not required to respond to this collection of information unless it displays a valid OMB control number near the title of the electronic collection instrument, or for on-line applications, on the first screen viewed by the respondents. Send comments regarding the accuracy of the burden estimate and any suggestions for reducing the burden to: Information Collections Management, Department of Homeland Security, Federal Emergency Management Agency, 500 C Street, SW, Washington, DC 20472, Paperwork Reduction Project (1660-0036) **NOTE: Do not send your completed form to this address.**

The following survey is voluntary.

OMB Control Number 1660-0036 Expiration _____

Hello, I'm calling from FEMA, the Federal Emergency Management Agency. My name is My ID # isMay I please speak with(applicant name)?
Are you the one who handled your FEMA application?
If no: Thank you for your time and have a good day/evening. (Mark Attempt)
If yes: We're looking for ways to improve the quality of our service and your opinion is very important to us. Would you volunteer to take 5-8 minutes to answer some questions?
If No: I understand. Thank you for your time. Have a good day/evening.
If yes: Thank you. The following questions have been approved by the Office of Management and Budget under number 1660-0036. Please be assured your answers will not affect the outcome of your application for FEMA assistance.

OMB Control Number 1660-0036 Expiration _____

INFORMATION PACKET	
Question	Response Options
To begin, I'd like to ask you about the information packet FEMA mailed to yo	u. This included a list of agencies that you might
contact to aid in your recovery from the disaster.	
IP1. Have you received the packet?	□ Yes
(DO NOT read list)	□ No
If yes, go to IP2 If No or Don't Know/Do not remember, go to next series.	□ Don't know / Do not remember
IP2. Were any of the referrals useful?	□ Yes
·	□ No
If yes, go to IP3. If no, go to IPQ4. If Don't Know/Do not remember, go to	□ Don't know / Do not remember
next series.	
IP3. Which referrals were helpful?	□ SBA
·	□ IRS
(DO NOT read list)	□ ARC
(Check all that apply)	□ Veterans Affairs
Go to IP5.	□ Social Security
	Other (Specify)
IP4. Which referral(s) were not useful?	<u> </u>
	Don't know / Do not remember
ID4a. What information would have been more helpful to you?	□ Don't know / Do not remember □ (Specify)
IP4a. What information would have been more helpful to you?	<u> </u>
IP5. Overall, how would you rate the information in this packet? Would you	□ Excellent □ Good
say it was	□ Satisfactory
(READ list) (If Below average/Poor, go to IP5b) (If Excellent, Good,	Below average
Satisfactory, go to IP6.)	□ Poor
	□ (Do not read) Don't Know/Do not Remember
IP5b. Why do you feel it was below average or poor?	□ Confusing
	□ Too Complex
(DO NOT read list)	Hard to Understand
	□ Bureaucratic
	□ Not Accurate
	□ Misleading
	Of no benefit

OMB Control Number 1660-0036 Expiration _____

			[sufficient det		_	
			[oo much deta		n	
			-		anguage Issu		_	
			[O	ther (Put spe	ecific respo	nse in co	mments box)
NFORMATION PACKET - SUGGESTIONS TO IMP	ROVE							
P6. What suggestions do you have that might help to	impr	ove the in	formation	pacl	ket?			
Clarify)				•				
APPLICANT GUIDE								
You may also have been mailed a booklet called "F	lelp /	After a Dis	aster: Aı	n Ap	plicant's G	uide to Dis	aster As	sistance."
							İ	
AG3. Have you had a chance to read it?		YES	NO		Did not	Don't Reme	mber	
					Receive it			
(If code Yes, go to AG3a, otherwise skip to next								
series.)								
AG3b. Using a rating scale Excellent, Good,								
Satisfactory, Below Average or Poor, how would	<u> </u>							5 // //
you rate the "Applicant's Guide" on?		xcellent	Good	Sa	atisfactory	Below	Poor	Don't Know/ No Opinion
(READ scale only as needed)						Average		No Opinion
(NEAD Scale only as needed)								
AG3c. Being easy to understand?								
ACOd Bairannall anna in 10	$\vdash \vdash$			_				
AG3d. Being well organized?								
AG3e Containing information helpful to your recovery?				1			П	

OMB Control Number 1660-0036 Expiration _____

APPLICANT GUIDE – Overall							
AG3g. Everything considered, what would be you overall rating of the "Guide"? Would you say it was (Read scale only as needed)		ellent	Good	Satisfactory	Below Average	Poor	Don't Know/ No Opinion
(If Below Average or Poor go to AG3h)]					
AG3h. Why were you less than satisfied with the Guide? (Clarify)							
AG3i. What other types of information would be useful to you? (Do not read, select all that apply)	The amount Check list Estimated Information Information Information Information Specific in Specific in Contact int	int of ass with a didineline in about in about in about information iformation w/No C	sistance (in o escription o s of each st FEMA's role FEMA's pur other relief o n about the n on how to n (names, to pinion		rocess)	01 02 03 04 05 06 07 08 09 10 11 12 99
APPLICANT GUIDE - SUGGESTIONS TO IMP AG3h. What suggestions do you have that would (Clarify)		nprove t	the Applica	nt Guide?			

OMB Control Number 1660-0036 Expiration _____

		1									
LETTERS											
Now I'd like you to think about the letter you receive and date.)	d expl	aining F	EM <i>A</i>	\'s ass	sistar	nce to you.	(Auto	populat	e from	i NEN	∕IIS letter
Let4. Using the same rating scale of excellent, good satisfactory, below average or poor, how would you the letter on: (Refer to letter date and code)		Exceller	nt	Goo	d	Satisfactor	- 1	Below Average	Po	or	Don't Know/ No Opinion
Let4a. How quickly you received the letter?]	
Let4b. How easy it was to read?]	
Let4c. How well it explained what you needed to do next	?										
Let4d. How well it explained the reasons for your case decision?]	
Let4e. How would you rate the instructions for what to do you disagree with the decision?	o if										
LETTERS - Overall Rating											
Let4g.What would be your overall rating of the initial letter?	Exc	cellent	Go	ood	Sat	isfactory	_	low rage	Poor	ı	Don't Know/ No
(READ scale only as needed)]]			Opinion
LETTERS - SUGGESTIONS TO IMPROVE											
Let4h. What suggestions do you have that might he	lp impi	rove the	lette	er?							
(Clarify)											

OMB Control Number 1660-0036 Expiration _____

APPEAL PROCESS OVERALL	
Question	Response Options
You recently appealed to have your case re-evaluated and we'd like to ask you some questions regarding your appeal. APL1. Based on your experience so far, how would you rate the overall appeal process? Would you say it's been	□ Excellent □ Good □ Satisfactory □ Below average □ Poor □ (DO NOT read) Don't know / No opinion
(READ list) (If below average or poor, go to APL1a)	
APL1a. What caused you to be dissatisfied?	 Poor Customer Service Reps didn't explain programs clearly Reps couldn't answer questions
(DO NOT read list. Mark all that apply.)	 Still didn't receive enough money Should get it right the first time Too hard
	 Too complicated Too much paper work Too time consuming then denied
	Took too long to get more moneyOther (Put specific response in comments box)

OMB Control	Number	1660-0036
	Expira	ation

APPEALS SERIES

APPEALS SERIES	
Question	Response Options
APL2. Which decision did you appeal?.	 Home Repair Rental Assistance Personal Property Hotel Reimbursement Transportation Other (Medical, Dental, Funeral)
Question	Response Options
APL3. Did you have adequate time to send the necessary documents to I before the deadline? Do Not Read List (If no or insufficient, go to APL2a)	FEMA Ves (Sent all) No (Did not send any) Insufficient (Sent only some of the documents) (Do not read) Do not remember / Don't know
APL3a. Which documents were you having difficulty sending?	 Estimates Receipts Insurance Making copies of any of the above (Do not read) Do not remember / Don't know
APL3b. Did you need additional help from a Representative on the require documents? (Do not Read list of documents) (If yes, go toAPL3c)	Yes, spoke with representative Yes, but never called No (go to next series) (Do not read) Do not remember / Don't know
APL3c. How would you rate the Representative on explaining the requirer for the documents? Would you say the explanation was (Read list)	ments

OMB Control Number 1660-0036

Expiration
DO NOT read) Don't know / No opinion

APPEAL PROCESS - SUGGESTIONS TO IMPROVE					
APL3d. What suggestions do you have that would help to improve the Appeal Process?					
(Clarify)					

OMB Control Number 1660-0036 Expiration _____

RECERTIFICATION PROCESS OVERALL	
Question	Response Options
You recently requested additional rental assistance and we'd like to ask you some questions about this.	□ Excellent □ Good □ Satisfactory
RCRT1. Based on your experience so far, please rate the overall process of being considered for additional rental assistance. Would you say it's been	□ Below average □ Poor □ (DO NOT read) Don't know / No opinion
(READ list) (If below average or poor, go to RCRT1a)	
DODT4 - Milest as and as to be discould find	□ Poor Customer Service
RCRT1a. What caused you to be dissatisfied?	Reps didn't explain programs clearly
(DO NICT wood list. Moule all that south.)	Reps couldn't answer questionsStill didn't receive enough money
(DO NOT read list. Mark all that apply.)	□ Too complicated
	□ Too hard
	☐ Too much paper work
	Did not understand what documents were required
	□ Could not obtain required documents
	□ Too time consuming then denied
	□ Took too long to get more money
	 Other (Put specific response in comments box)

OMB Control Number 1660-0036 Expiration _____

RECERTIFICATION SERIES	
Question	Response Options
RCRT2. Did you have adequate time to send the necessary docume FEMA before the deadline? Do not read list (If no or insufficient, go to RCRT2a) (If "Yes", go to RCRT2b.)	ents to Yes (Sent all) No (Did not send any) Insufficient (Sent only some of the documents) (Do not read) Do not remember / Don't know
RCRT2a. Which documents were you having difficulty sending?	 Income Statement Lease Rent Receipts Making copies of any of the above (Do not read) Do not remember / Don't know
RCRT2b. Did you need additional help from a Representative on the documents? (Do not read list) (If yes, go to RCRT2c)	Yes, and spoke with repre. Yes, never called No (go to next series) (Do not read) Do not remember / Don't know
RCRT2c. How would you rate the Representative on explaining the requirements for the documents? Would you say the explanation was (Read list)	□ Excellent □ Good □ Satisfactory □ Below average □ Poor □ (DO NOT read) Don't know / No opinion

RECERTIFICATION - SUGGESTIONS TO IMPROVE		
RCRT2d. What suggestions do you have that would help to improve the Recertification Process?		
(Clarify)		

OMB Control Number 1660-0036 Expiration _____

PRE-PLACEMENT INTERVIEW PROCESS OVERALL			
Question	Response Options		
Include this topic/series when applicable:	□ Excellent		
You recently asked FEMA to provide you with a temporary housing unit and we'd like to ask you some questions about that.	□ Good □ Satisfactory □ Below average		
PPI1. Based on your experience so far, please rate the overall process of requesting a temporary housing unit. Would you say it's been	□ Poor □ (DO NOT read) Don't know / No opinion		
(READ list) (If below average or poor, go to PPI1a)			
PPI1a. What caused you to be dissatisfied?	Didn't receive enough / any enough assistancePoor attitude		
(DO NOT read list. Mark all that apply.)	 Process too complicated Didn't explain programs clearly or could not answer my questions Didn't seem interested in helping me Didn't take time to listen to me Took too long to answer questions or process Didn't treat me with respect Other (Put specific response in comments box) 		

OMB Control Number 1660-0036 Expiration _____

PRE-PLACEMENT INTERVIEW SERIES		
Question		Response Options
PPI2. Did you have adequate time to send the necessary documents to FEMA		Yes (Sent all)
before the deadline?		No (Did not send any)
Do not read list		Insufficient (Sent only some of
(If no or insufficient, go to PPI3a)		the documents)
(If "Yes", go to PPI3b.)		(Do not read) Do not remember /
,		Don't know
PPI2a. Which documents were you having difficulty sending?	_	Estimates
		Receipts
		Insurance
		Making copies of any of the
	l_	above
		(Do not read) Do not remember / Don't know
DDI2h Did you need additional halp from a Depresentative on which decuments	-	
PPI2b. Did you need additional help from a Representative on which documents		Yes, and spoke with repre. Yes, never called
were required?		No (go to next series)
(Do not read list)		(Do not read) Do not remember /
(If yes, go toPPI2d)	"	Don't know
PPI2c. How would you rate [the Representative] on explaining the requirements		Excellent
for the documents? Would you say		Good
lor the documents: would you say		Satisfactory
(Read list AS NEEDED)		Below average
(Neau list As NEEDED)		Poor
		(DO NOT read) Don't know / No
	"	opinion
		υμιτιστι

PPI - SUGGESTIONS TO IMPROVE

PPI2d. What suggestions do you have that would help to improve the Interview process for a temporary housing unit? (Clarify)

OMB Control Number 1660-0036 Expiration _____

	0TIO1	0 TO		
SUGGE	S HON	5 10	IMPRO)VE

Questio	on	Response Options
Sug. FEMA is interested in getting you	•	Open-ended Question
to improve our service. What other sug	• • • • • • • • • • • • • • • • • • • •	Type response in designated area.
on to improve FEMA correspondence t	hat you haven't already shared?	
(Olarif all an annual Burks	THE WALLAT OTHER	
(Clarify all vague responses. Probe once with "WHAT OTHER SUGGESTIONS?")		

PERMISSION QUESTION

· Eramosion Question	
Question	Response Options
Your opinion is very valuable to us, may we call ask you some additional questions?	you at a later date to

CLOSING

If "yes," Thank you for your time. Have a good day/evening.

If "No," I understand. Thank you for your time. Have a good day/evening.